Lien-Jin Chiang

COMPLETE IF KNOWN

TO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**Attorney Docket Number** 

First Named Inventor

**DECLARATION FOR UTILITY OR** 

**DESIGN** 

PATENT APPLICATION

(37 CFR 1.63)	1	COMPLETE IF KNOWN								
(37 31 11 11.00)	,	Application Number								
☑ Declaration Submitted with Initia	al Filing	Filing Date								
OR  Declaration Submitted after Initia	al Filing (surcharge	e Group Art Unit								
(37 CFR 1.16(3)) required)		Examiner Name								
As a below named inventor, I hereby declare that:										
My residence, mailing address, and citizenship are as stated below next to my name.										
I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  ELECTRONIC APPARATUS WITH NATURAL CONVECTION STRUCTURE										
the specification of which										
☑ is attached hereto										
OR  was filed onas United States Application Number or										
PCT International Application					and					
was amended on										
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including continuation-in-part applications, material information which became available between the filing date of the prior										
application and the national or PCT in hereby claim foreign priority benefit	nternational filing	date of the continuation-	(h) of any foreign	application	n(s) for					
patent inventor=s or plant breeder's	rights certificate	(s), or 365(a) of any PCT	international app	lication wh	ich					
designated at least one country other	than the United	States of America, listed b	elow and have al	so identifie	d below,					
by checking the box, any foreign app	lication for pater	nt or inventor=s certificate	, or of any PCT ir	iternationa	.I					
Prior Foreign Application Number(s)				Certified Copy Attached?						
092108471	Taiwan	04/11/2003		Yes	No					
092108471	Talwaii	04/11/2000								
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached										
hereto. I hereby claim the benefit under Title 35, United Stated Code ' 119(e) of any Untied States provisional application(s) listed below:										
Application Number(s)	Additional provisional application									
			numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.							

[Page \_\_\_\_ of \_\_\_\_]

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DECLARATION - Utility or Design Patent Application												
brother carry of bodgin desiry production												
I hereby claim the benefit under Title 35, United States Code ' 120 of any United States application(s), or ' 365(c) of any PCT International Application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code ' 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations ' 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.												
U.S Parent Application or PCT Parent Number				Parent Filing Date (MM/DD/YYYY)			Р	nt Patent Number if applicable)				
	-											
<u></u>												
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.												
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  © Customer No.: 23364 OR © Registered practitioner(s) name/registration number listed below:												
N	ame	Registrat	ion Nur	nber	Name				Registration Number			
Director all correspondence to: ☑ Customer Number: 23364 OR ☐ Correspondence address below:												
Name						-			•			
Address	***											
Address												
City			State		ZIP							
Country		Telephone			Fax							
Name of Sole or First Inventor						A petition has been filed for the inventor						
Given Name (first and middle [if any])					Family Name or Surname							
Lien-Jen					Chiang							
Inventor's Signature	Jien T	in Chia	ma					Date		August 1, 2003		
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City	Taoyuan Hsien			Zip	320			Country Taiwan				
Additional inventor(s) are being named on supplemental Additional Inventor(s) Sheet PTO/SB/02A attached hereto.												

DECLARATION		ADDITIONAL INVENTOR(S) (Supplemental Sheet)											
Name of Additional Joint Inventor, if any:												a inventor	
Given Name (first and middle [if any])			Family Name or Surname										
Chun-Chen			Chen										
Inventor's Signature	Chin-Che	en, Chen				Date Augus			st 1, 2003				
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Post Office Address													
City	Taoyuan Hsien	Sta	State			ZIP	320		Country Taiwa				
Name of Additional Joint Inventor, if any:						A p	etition	has bee	n filed	for this uns	signe	ed inventor	
Given Name (first and	Fami	ly Na	me o	r Surna	me								
Inventor's Signature							Date	9					
Residence: City			State	;		Со	untry			Citizenshi	p		
Post Office Address													
Post Office Address													
City		Sta	ate				ZIP			Country		iwan	
Name of Additional J	:				Ар	etition	has bee	en filed	for this un	sign	ed inventor		
Given Name (first and middle [if any]) Family Name or Surname													
· · · · · · · · · · · · · · · · · · ·		<b>†</b>											
Inventor=s Signature							Dat	е					
Residence: City			State	€		Co	untry			Citizenshi	ip		
Post Office Address			_										
Post Office Address													
City		Sta	ate			1	ZIP			Country			
Name of Additional Joint Inventor, if any:						ed inventor							
Given Name (first and middle [if any]) Family Name or Surname													
Inventor=s Signature						Date							
Residence: City			State	е		Co	ountry			Citizensh	ip	<u></u>	
Post Office Address													
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